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CONFIRMATION NO. 6803

SERIAL NUMBER 09/715,983	FILING DATE 11/20/2000 RULE	CLASS 514	GROUP ART UNIT 1635	ATTORNEY DOCKET NO. ISPH-0519
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APPLICANTS

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**** CONTINUING DATA *******

THIS APPLICATION IS A CIP OF PCT/US00/40261 06/21/2000

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **
** 07/06/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING	TOTAL CLAIMS 63	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

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TITLE

Antisense modulation of PI3K p85 expression

FILING FEE RECEIVED 807	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
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